



Lipsitz Green Scime Cambria LLP

Attorneys at Law

42 Delaware Avenue, Suite 120, Buffalo, New York 14202-3974 P /16 849 1333 F /16 855 1580 (Not for Service) www.lglaw.com

Paul J. Cambria, Jr.
James T. Scime
Herbert L. Greenman
Patrick C. O'Reilly
Michael Schiavone
Lorraine Kelley
William M. Engenbaum
Joseph J. Gumkowski
Richard P. Weibbeck, Jr.
Mark J. Stelmaker
Barry Nelson Covert
Christopher S. Mattingly
Robert L. Roseman
Thomas M. Mercure
John A. Collins
George E. Riedel, Jr.
Michael P. Stuenkel
Jeffrey F. Rema
Sharon M. Heim
Cherie L. Peterson
Paul J. Gieslik
Joseph T. Kremer
Michael W. Wierzbiewski
Gregory R. Krull
Michelle A. Smith
Bridget M. O'Connell
James B. Subjack
Steven S. Fox
Michael S. Deal
Joseph J. Manna
Philip Stelfrid
Amy L. Andrus
Robert F. Zick
Kevin W. Houshan
A. Nicholas Hakides
Thomas C. Burnham
William P. Moore
Jinda R. Hassberg
Robin L. Stone
David C. Zimmerman
Karen D. Feger
Patrick B. Shanahan
Bethany A. Sniek
Jonathan W. Brown
Amanda M. Warner
Laura A. Myers
Teresa A. Bailey
Sean P. Galligan

OF COUNSEL
Richard Lipsitz
Carl A. Green
Raymond F. Roll, Jr.
Herold Price Ehringer
Lugene W. Salisbury

SPECIAL COUNSEL
James W. Kirkpatrick
Roger W. Wilcox, Jr.
Doris A. Scinto
Philip H. Magner, Jr.
David G. Henry
Richard D. Furlong
Jeffrey C. Mannillo
Scott M. Schwartz

LICENSED WORKERS' COMPENSATION REPRESENTATIVE
Keith J. Williams
Patricia N. Lyman

Seymour I. Schuller
1951-1988

Evan F. James
1955-1989

* Also admitted in District of Columbia
* Also admitted in Florida
* Also admitted in California
* Also admitted in New Jersey
* Also admitted in Pennsylvania
* Also admitted in Ohio
* Also admitted in Illinois

October 4, 2006

David D. Bird
Clerk of the Court
United States Bankruptcy Court
District of Delaware
824 Market Street
5th Floor
Wilmington, DE 19801

Re: WR Grace Bankruptcy

Dear Sir:

Enclosed please find claim forms which you sent to us. You have us down as counsel but we have no record of their ever having been our clients.

Very truly yours,


Lipsitz Green Scime Cambria LLP

By: Joseph T. Kremer, Esq.

/ek

Encl.

Writer's Extension: 450
Writer's Direct Fax: 716-855-1580
E-Mail: jkremer@lglaw.com

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKL)
<p>NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): SHARPE, JR, RICHARD E	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	THIS SPACE IS FOR COURT USE ONLY
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-380  10321069074632		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:

<p>PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)</p> <p><input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.</p>

<p>PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)</p> <p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <p>1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:</p> <p>a. Title of Case: _____</p> <p>b. Court Where Complaint was Filed: _____</p> <p>c. Court Where Case was Pending on April 2, 2001: _____</p> <p>d. Case Number: _____</p> <p>e. Date Complaint was Filed: _____</p> <p>f. Name of Your Legal Counsel: _____</p> <p>g. Address of Your Legal Counsel: _____</p> <p>_____</p> <p>_____</p>


000512428



K&E 11309803.1

000141074632



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	THIS SPACE IS FOR COURT USE ONLY
NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): ANGELONE, EMMETT P	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVENUE SUITE 300 BUFFALO NY 14202-390  10321069085219		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I

(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)

- ☐ Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. **AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.**

PART II

(To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)

Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.

1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:
 - a. Title of Case: _____
 - b. Court Where Complaint was Filed: _____
 - c. Court Where Case was Pending on April 2, 2001: _____
 - d. Case Number: _____
 - e. Date Complaint was Filed: _____
 - f. Name of Your Legal Counsel: _____
 - g. Address of Your Legal Counsel: _____


000263450



K&E 11309803.1

000141085219



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM	
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)	
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>			
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): OSBORNE, MATTHEW J		<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069036889		THIS SPACE IS FOR COURT USE ONLY	
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:	

PART I
(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)

- ☐ Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. **AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.**

PART II
(To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)


Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.

1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:

- a. Title of Case: _____
- b. Court Where Complaint was Filed: _____
- c. Court Where Case was Pending on April 2, 2001: _____
- d. Case Number: _____
- e. Date Complaint was Filed: _____
- f. Name of Your Legal Counsel: _____
- g. Address of Your Legal Counsel: _____

000140036889



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): SMITH, KENNETH J	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	THIS SPACE IS FOR COURT USE ONLY
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069036890		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you <u>still</u> must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed	_____
c. Court Where Case was Pending on April 2, 2001:	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____


000275965



K&E 11309803.1

000140036890




UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	THIS SPACE IS FOR COURT USE ONLY
NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): OBRIEN, JOHN	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069136906		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:
a. Title of Case: _____ b. Court Where Complaint was Filed: _____ c. Court Where Case was Pending on April 2, 2001: _____ d. Case Number: _____ e. Date Complaint was Filed: _____ f. Name of Your Legal Counsel: _____ g. Address of Your Legal Counsel: _____ _____ _____

000140136906



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	THIS SPACE IS FOR COURT USE ONLY
NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): IZZO, CAROLINE	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA I 42 DELAWARE AVENUE SUITE 300 BUFFALO NY 14202-390  10321069085218		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed	_____
c. Court Where Case was Pending on April 2, 2001:	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____


001707168



K&E 11309803.1

000141085218



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): BLACK, ROGER	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	THIS SPACE IS FOR COURT USE ONLY
Name and address where notices should be sent: LIPSITZ, GREEN, FAHRINGER, ROLL, SAILSBURY & CAMBR 42 DELAWARE AVENUE BUFFALO NY 14202-240  10321069030215		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed	_____
c. Court Where Case was Pending on April 2, 2001:	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____


001229813



K&E 11309803.1

000140030215



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	THIS SPACE IS FOR COURT USE ONLY
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): MULVANEY, DONALD	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069036325		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I**(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)**

- ☐ Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. **AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.**


PART II**(To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)**

Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.

1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:
 - a. Title of Case: _____
 - b. Court Where Complaint was Filed: _____
 - c. Court Where Case was Pending on April 2, 2001: _____
 - d. Case Number: _____
 - e. Date Complaint was Filed: _____
 - f. Name of Your Legal Counsel: _____
 - g. Address of Your Legal Counsel: _____

000140036325




UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKI)
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): WUERSTLE, ARTHUR	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	THIS SPACE IS FOR COURT USE ONLY
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069026547		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed	_____
c. Court Where Case was Pending on April 2, 2001:	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____

000140026547



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): BALLARD, ROGER W		<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVENUE SUITE 300 BUFFALO NY 14202-390  10321069085217		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:

THIS SPACE IS FOR COURT USE ONLY

PART I

(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)

- ☐ Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. **AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.**

PART II

(To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)

Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.

1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:
- Title of Case: _____
 - Court Where Complaint was Filed: _____
 - Court Where Case was Pending on April 2, 2001: _____
 - Case Number: _____
 - Date Complaint was Filed: _____
 - Name of Your Legal Counsel: _____
 - Address of Your Legal Counsel: _____


000451642



K&E 11309803.1

000141085217



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM	
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)	
<p>NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>			
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): CASSIOL, ROBERT		<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-390		<input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case.	
 10321069074631		<input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court.	
		<input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:	

THIS SPACE IS FOR COURT USE ONLY

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed	_____
c. Court Where Case was Filed	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____


001516203



K&E 11309803.1

000141074631




UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	THIS SPACE IS FOR COURT USE ONLY
NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): JEWELL, JOSEPH J	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069014802		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed	_____
c. _____	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____

000140014802



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): MCNAMARA, PAUL M		<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069136634		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:

THIS SPACE IS FOR COURT USE ONLY

PART I

(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)

- ☐ Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. **AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.**

PART II


(To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)

Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.

1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:
- Title of Case: _____
 - Court Where Complaint was Filed: _____
 - Court Where Case was Pending on April 2, 2001: _____
 - Case Number: _____
 - Date Complaint was Filed: _____
 - Name of Your Legal Counsel: _____
 - Address of Your Legal Counsel: _____

000140136634



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): STUEBCHEN, JACK R	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	THIS SPACE IS FOR COURT USE ONLY
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-390  10321069074633		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I
(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)

- ☐ Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. **AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.**

PART II
(To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)

Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.

1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:
- Title of Case: _____
 - Court Where Complaint was Filed: _____
 - Court Where Case was Pending on April 2, 2001: _____
 - Case Number: _____
 - Date Complaint was Filed: _____
 - Name of Your Legal Counsel: _____
 - Address of Your Legal Counsel: _____


001106312



K&E 11309803.1

000141074633



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p> <p>Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): OHARA, MICHAEL</p> <p>Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA I. 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240</p>  <p>10321069136927</p>
<p><input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.</p> <p><input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case.</p> <p><input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court.</p> <p><input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____</p>		
<p>THIS SPACE IS FOR COURT USE ONLY</p>		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I
(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)

- ☐ Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. **AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.**

PART II
(To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)

Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.

1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:
- Title of Case: _____
 - Court Where Complaint was Filed: _____
 - Court Where Case was Pending on April 2, 2006: _____
 - Case Number: _____
 - Date Complaint was Filed: _____
 - Name of Your Legal Counsel: _____
 - Address of Your Legal Counsel: _____

000140136927

